REDEFINING THE ROLE OF SELF-CARE IN EUROPE

VISION, BARRIERS, AND RECOMMENDATIONS TO EMPOWER PEOPLE TO SELF-CARE

\VINTURA

COLOPHON

HALEON

ABOUT THIS WHITE PAPER

This aim of this white paper is to provide a vision for the future of self-care in Europe, beyond just the European Union ("EU"). This paper presents a fact-based overview of the current challenges and proposes their potential solutions in the form of a number of policy recommendations. In the context of this report, the pharmacy is considered part of the healthcare system.

The work underlying this report is based on research conducted by Vintura and sponsored by Haleon. The research was carried out by Vintura between May and December 2021, taking insights from a literature study and desk research. Two roundtable sessions were then established with relevant stakeholders in the field of self-care in Europe to discuss the themes from the initial Vintura research. These stakeholders were individuals from all over Europe, representing different types of organisations including those in academia, national governments, European and global organisations, non-profit organisations, and trade associations.

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EXECUTIVE SUMMARY

Health systems are waking up to a tremendous challenge after the COVID-19 pandemic: rising costs due to aging populations, more expensive treatments, and the disruptions caused by emerging technologies, societal change, and widespread misinformation. However, one thing is clear: to respond to these challenges, health systems need to strengthen their focus on prevention, healthy lifestyles, and health management.

Self-care has great potential to answer these challenges by empowering people and creating better ways of accessing healthcare. Self-care should be available to all and should not be considered a privilege. This white paper defines a coherent vision for self-care in Europe, outlines the current barriers, and suggests 10 actionable recommendations that will bring us closer to this vision.

SUMMARY

Improving **health literacy** and **skills to access trusted sources and reliable information** policy priorities is crucial. This will ensure that individuals can confidently search for, understand, and apply specific information to maintain healthy lifestyles, prevent disease, and manage illnesses.

Generating trusted evidence on the benefits of specific practices and creating willingness to practice self-care are equally important. Interventions will only be successful when efficacy and value can be demonstrated and used to encourage individuals or healthcare systems to adapt their behaviors.

To achieve effective integration of self-care in individuals' daily lives, it is key to **enable inclusive access**, ensuring nobody is left behind and that everybody can access the best practices, advice, or products, irrespective of their personal identity, or their social, economic, demographic or geographic status.

A **holistic and preventive approach to care** needs to be developed. Health care systems in Europe must expand their focus from treatments and cures to prevention and health promotion. They must embrace self-care as an important enabler for improved outcomes, population health, and savings for the overall health system.

Self-care needs to be part of an **integrated approach around person-centered care**. The continuous rise of chronic diseases and co-morbidities has highlighted the need for joint work between Healthcare Professionals (HCPs) and patients. For this, it is necessary to engage individuals in their own health management, and to encourage dialogue between patients and HCPs about daily self-care practices.

We need a **coherent set of policies at European and national level**. Self-care will only positively impact the population if the right strategies are developed and the right sets of initiatives (economic, regulatory, etc.) are implemented.

SUMMARY OF RECOMMENDATIONS:

1 INCLUDE HEALTH LITERACY AND SELF-CARE EDUCATION IN THE SCHOOL CURRICULA TO START BUILDING HEALTH LITERACY SKILLS EARLY ON IN LIFE

2 SIMPLIFY INFORMATION, INCLUDING OVER-THE-COUNTER LEAFLETS TO MAKE INFORMATION MORE ACCESSIBLE TO ALL

3 CREATE A "FACT CHECKING" PROJECT AT EU LEVEL

4 SUPPORT (REAL-WORLD) EVIDENCE GENERATION AND ACCEPTANCE FOR SELF-CARE PRODUCTS AND INTERVENTIONS

5 CREATE INNOVATIVE FINANCIAL SCHEMES TO MAKE SELF-CARE ACCESSIBLE TO ALL

SUMMARY OF RECOMMENDATIONS:

6 CREATE ENABLING FINANCIAL STRUCTURES TO SUPPORT PHARMACISTS IN THEIR ADVISORY ROLE

7 INCLUDE SELF-CARE IN THE CURRICULUM OF HEALTHCARE PROFESSIONALS AND/OR CREATE A EUROPE-WIDE SELF-CARE TRAINING PROGRAM FOR HCPS

8 CREATE STRUCTURES AND TOOLS THAT SUPPORT DATA EXCHANGE AND COMMUNICATION AROUND SELF-CARE

9 CREATE PLATFORMS FOR COLLABORATION BETWEEN DIFFERENT TYPES OF HCPS

10 CREATE SUPPORTING POLICIES FOR SELF-CARE AT THE EUROPEAN AND NATIONAL LEVEL

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CHAPTER 1

INTRODUCTION

> **Self-care is defined by the WHO as "the ability of individuals, families and communities to promote health, prevent disease, maintain health, and cope with illness and disability with or without the support of a healthcare provider"**

European healthcare systems currently face an enormous challenge as ageing populations and costly innovative therapies continuously drive the need for larger healthcare budgets. By 2050, it is estimated that approximately 30% of the European population will be aged 65 or older, and that people will be living with an increasing number of chronic conditions and co-morbidities needing increasingly more costly therapies (Figure 1)[1,2]. In addition, the growing scarcity of doctors and nurses puts additional pressure on care delivery: for example, Europe has an estimated shortage of around 50,000 public doctors[3], which is set to increase over the coming years. In comparison, the UK has a documented predicted shortage of 250,000 HCPs for 2050[4].

HCPs and health authorities share the vision that prevention is becoming a crucial aspect of the future health of individuals[5], achieved through stronger engagement in the management of their own health. Healthcare systems must meet these challenges and continue to provide high-quality care through a transformational shift towards sustainable and equitable healthcare. For this, it is important to empower and equip individuals, with the support of healthcare professionals when needed, to promote their health and to prevent and treat disease in a way that reduces/minimizes the burden on healthcare systems while improving the individual's overall experience and outcomes. The concept of self-care (as defined below) comes into the picture here, as it bridges the need for a healthier population and the potential of health promotion.

Figure 1

Challenges for healthcare systems in Europe[1,2]

Aging population with an increasing number of chronic conditions

Increasing financial pressure due to increasing healthcare costs

Healthcare staff shortages accentuated by the COVID-19 pandemic

91 MILLION people ≥65y

130 MILLION people ≥65y

37%

2019

2050

IN 2019, **20%** OF THE POPULATION IN EUROPE WAS ≥65Y

BY 2050, NEARLY **30%** OF THE POPULATION WILL BE ≥65Y

37% OF PEOPLE ≥65Y REPORT HAVING AT LEAST **2 CHRONIC CONDITIONS**

Self-care plays a key role in both promoting a preventive approach to care and helping to optimize healthcare resources. In our previous study "The health-economic benefits of self-care", we showed that self-care can bring substantial health-economic benefits to European healthcare systems[6]. Greater adoption and improved utilization of self-care can bring economic savings, individual time savings, better health outcomes in both patients and the wider population, a better quality of life, and help relieve resource pressure (Figure 2). A 2022 report by the Association of the European Self-Care Industry (AESGP) showed that 1.2 billion cases of minor ailments are currently self-managed in Europe. If this was not the case, 120,000 more physicians would be needed[7]. Despite all these benefits, self-care remains a hidden, underfunded and underpromoted force in our healthcare systems. More work needs to be done to ensure self-care is well-integrated in every individual's care journey and to provide individuals with the tools and encouragement they need to engage in their own health management, and to support HCPs in educating the wider population on self-care.

The COVID-19 pandemic has exerted immense pressure on our healthcare systems. It has therefore accentuated the need for resilient healthcare systems, and the value that self-care offers to achieve this resilience. Many individuals suddenly needed to take care of their own health more independently, to identify symptoms with the help of outside resources, and to manage their diseases with only remote guidance from HCPs. This contributed to an increased need for individuals to become fully empowered to engage in self-care, and the need for the healthcare system to integrate these practices in the wider healthcare continuum.

Figure 2

Self-care brings several health-economic benefits for European healthcare systems.[6,7]

Self-care can help relieve the pressure on healthcare staff

Reasonable self-care can improve health outcomes

Self-care can create economic savings for healthcare systems

1.2 BILLION CASES OF MINOR AILMENTS ARE CURRENTLY SELF-MANAGED IN EUROPE EVERY YEAR

IF THIS WAS NOT THE CASE, **120,000 MORE PHYSICIANS WOULD BE NEEDED IN EUROPE**

This white paper captures the key learnings from independent research into self-care in Europe, as well as from a series of roundtable discussions and interviews conducted throughout late 2021, with academics, policy makers and industry representatives, HCPs, and consumer & patient associations, both at pan-European and national level. We discuss a vision for a holistic and person-centered approach to self-care in Europe, and also identify the key hurdles preventing us from achieving that vision, plus key actions, and recommendations to move forward (Fig. 3).

Figure 3

A vision for self-care in Europe

3

INTEGRATED, INDIVIDUAL-CENTERED CARE

2

IMPROVED HEALTH LITERACY AND OBJECTIVE SOURCES OF INFORMATION

4

PHARMACISTS AS ADVISORS IN SELF-CARE

1

A HOLISTIC AND PREVENTIVE APPROACH TO CARE

5

UNLOCKING THE POTENTIAL OF DATA
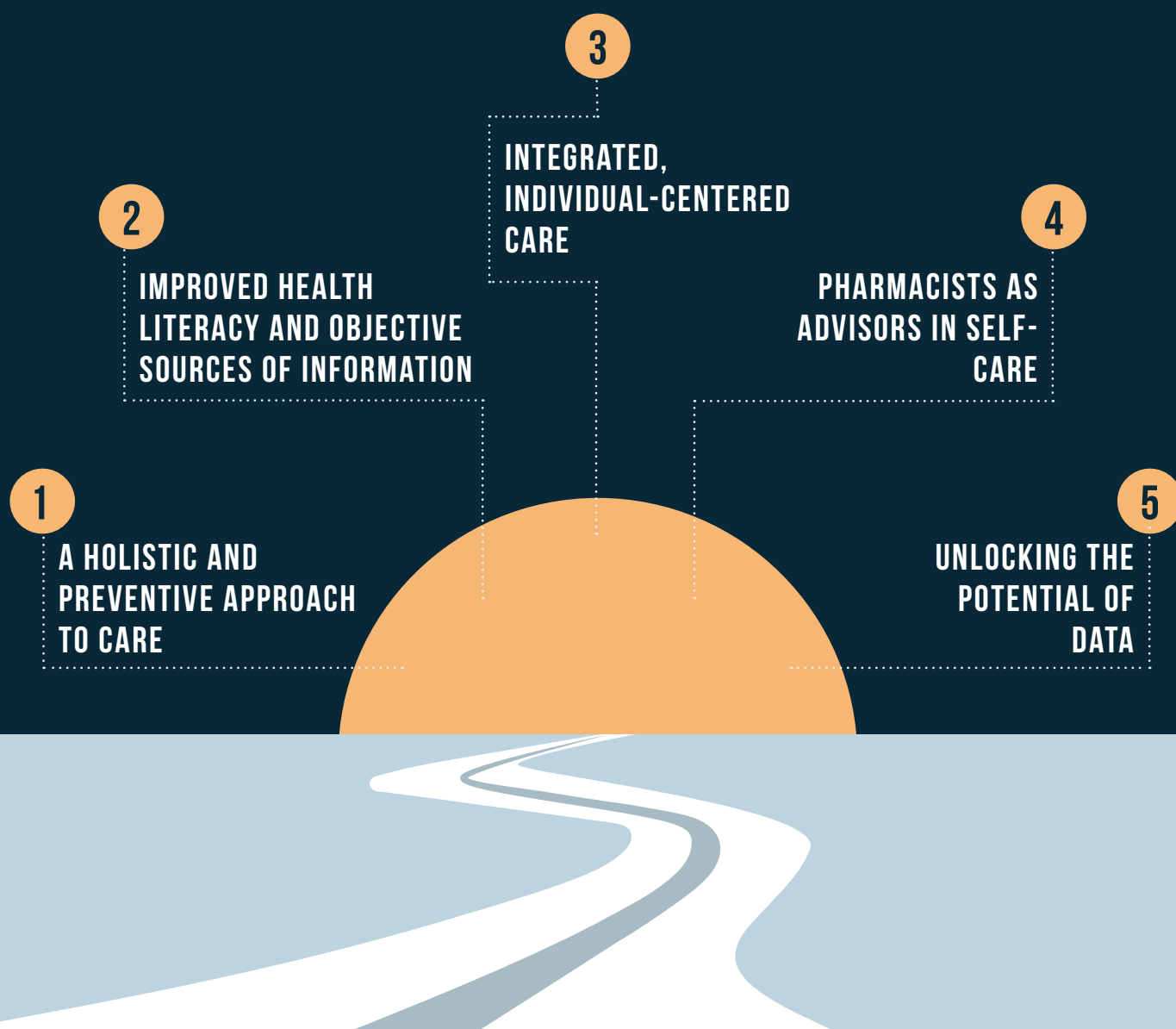
In our recent roundtables, we discussed the vision for self-care in Europe with a multi-stakeholder group of experts. The consensus reached includes a vision where self-care is centered around the individual and is fully integrated within healthcare. This will be enabled by the empowerment of individuals to engage in self-care via health literacy, motivation and access, and by a system where the role of HCPs evolves to fit these new needs. This way, we identified two separate areas that this white paper explores (Fig. 4): empowering individuals to engage in self-care and working towards a full integration of self-care as part of the healthcare system.

Figure 4

It is key to empower individuals to engage in self-care, and to work towards a full integration of self-care as part of the healthcare system

IMPROVING THE ROLE OF SELF-CARE IN EUROPE

1 Improving the role of self-care in Europe

2 Increasing healthcare system readiness to support and enable self-care

CHAPTER 2

EMPOWERING INDIVIDUALS TO ENGAGE IN SELF-CARE

> **Health literacy is defined as "the knowledge, motivation, and competencies to access, understand appraise and apply information to form judgment and make decisions regarding health care, disease prevention and health promotion in everyday life to maintain and improve quality of life during the life course"**
> **(Sørensen et al., 2012)**

WHO defines empowerment as "a process through which people gain greater control over decisions and actions affecting their health." It should be seen as both an individual and a community process.[8] Individuals who are both empowered and engaged in the management of their health will have a better understanding of their medical condition, will be able to self-manage when suitable, will have better communication around their condition and will seek timely HCP support as they need it. This often translates to better health outcomes, and less overall expenses[9].

To empower individuals in self-care, we need to ensure that the right capabilities, motivation and opportunities exist (Fig. 5). Only in this way will we be able to educate and support individuals on the most beneficial behaviors for their health. Figure 6 on the next page shows how each of these three key components has a separate function in empowering individuals to take care of their health in a fully functional way.

With the overarching goal of empowering individuals to engage in their own self-care journeys, we propose five key recommendations to improve **capabilities**, increase **motivation** and provide **opportunities** for individuals to engage in self-care.

Figure 5

Capabilities, Opportunities and Motivation are the three key factors capable of changing Behavior.

The COM-B framework was developed by Professor Susan Michie and colleagues in 2011 and states that **capability**, **opportunity**, and **motivation** interact to generate behaviour:

CAPABILITY

is defined as the individual's capacity to engage in the activity concerned. It includes having the necessary knowledge and skills.

MOTIVATION

is defined as all those brain processes that energize and direct behaviour, not just goals and conscious decision-making. It includes habitual processes, as well as analytical decision-making.

OPPORTUNITY

is defined as all the factors that lie outside the individual that make the behaviour prossible or prompt it.

BEHAVIOUR

Figure 6

Key elements to empower individuals to engage in self-care

EMPOWERING INDIVIDUALS TO ENGAGE IN SELF-CARE

CAPABILITY

Health literacy

The capabilities of an individual to engage in self-care are directly connected to the **health literacy skills** of the individual to search for health-related information, understand it and take the right actions.

MOTIVATION

Evidence

When it comes to self-care, motivation has two important aspects: **individual's willingness to engage in self-care** and **the existence of evidence** that encourages the right behaviours.

OPPORTUNITY

Access

When individuals have the right skills and motivation to engage in self-care, **access and affordability** should also be there for individuals to engage in self-care.
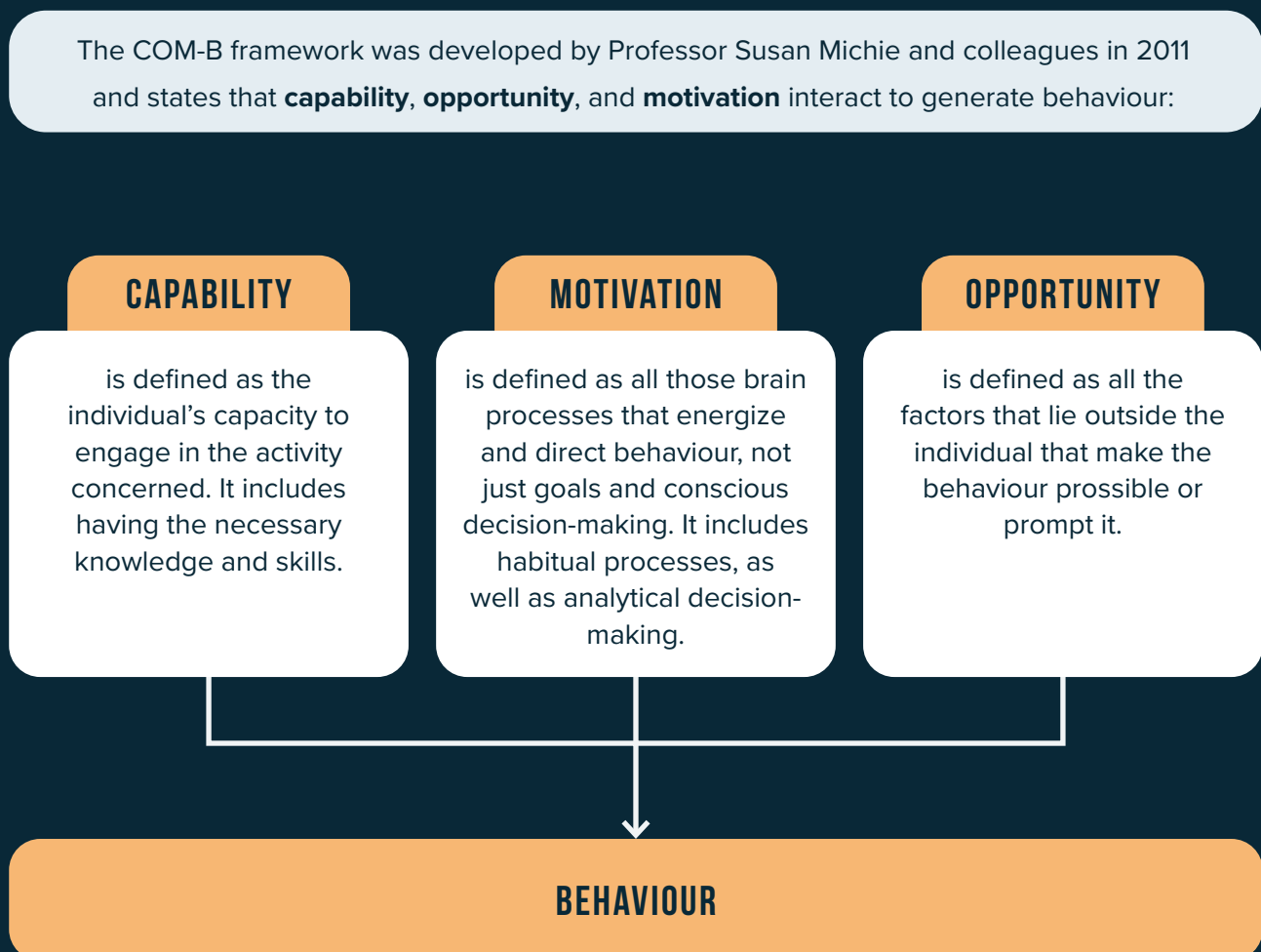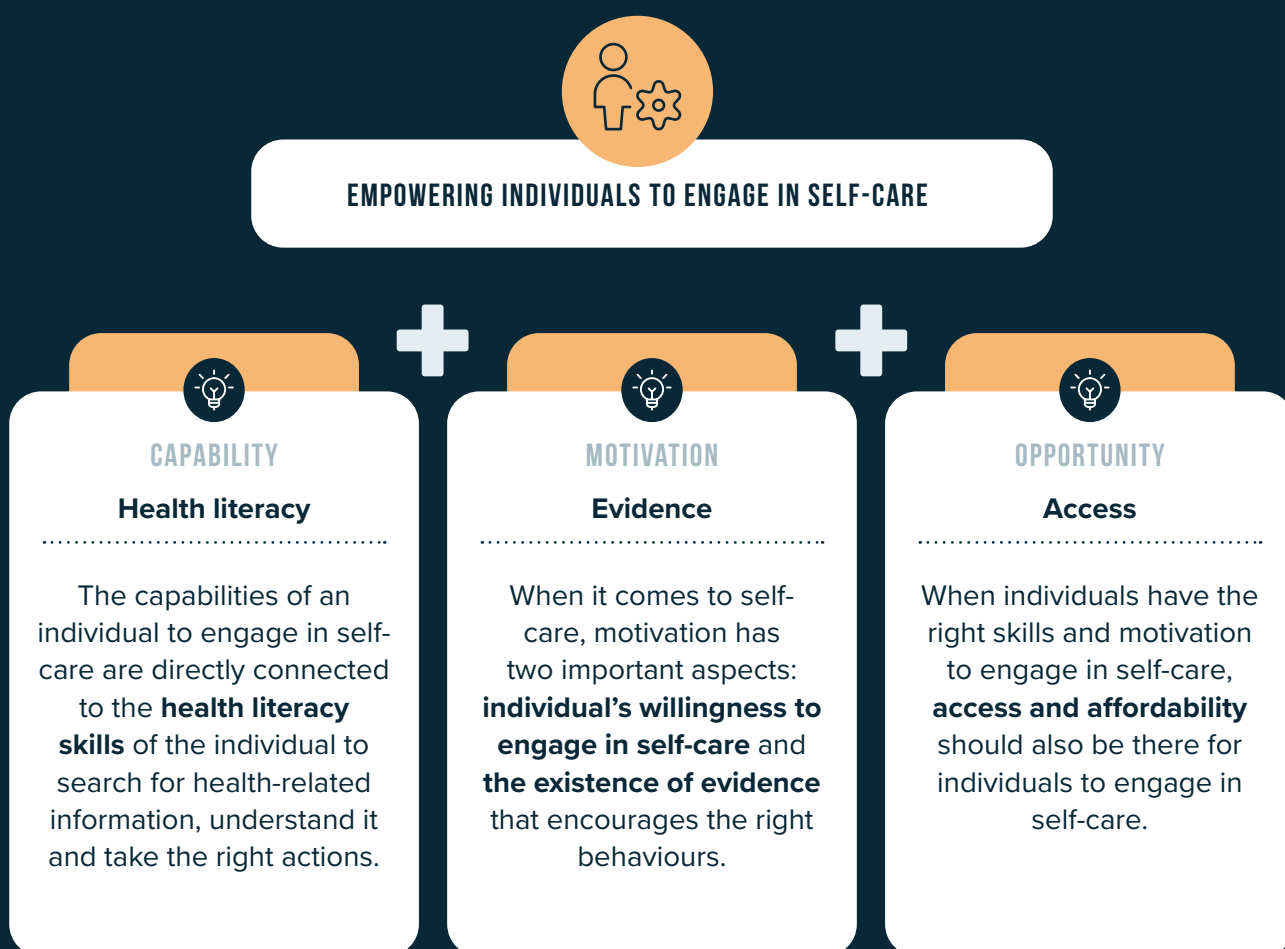
2.1.

CAPABILITIES: IMPROVING HEALTH LITERACY SKILLS

VISION

IMPROVING HEALTH LITERACY SKILLS AND EDUCATION

Healthcare, including self-care, is becoming increasingly complex and complicated, with a greater number of options and practices to choose from and increased difficulty navigating them. This can become overwhelming for some individuals[10], as interventions are becoming increasingly complex[11] and individualised[12]. Therefore, we need to make it easy for individuals to understand which behaviors and practices are best for them.

To empower individuals to take decisions about their own health in this increasingly complex environment, it is essential to equip them with (a) the right skills to access relevant information, (b) the right tools to access and interpret health information objectively, and (c) the right knowledge to understand the basics of healthy choices. This will enable individuals to effectively take care of their own health. Given the increasing amount of health data available through digital channels and social media, this means some of the skills needed fall outside the traditional domain of healthcare. Additionally, people need the capabilities to understand health information, separate factual information from promotional materials and misinformation, ask for advice from healthcare professionals when necessary, and apply this information to create sustainable healthy behaviors.

"**Self-care is a fact for anybody living with a chronic disease, and often healthcare systems are not set up to recognize or enable that**"

Matthew Fenech – Founder and CMedO, Una Health

BARRIERS

POOR HEALTH LITERACY SKILLS AND TRUSTWORTHY INFORMATION SOURCES

Health literacy is an essential skill to enable self-care. Unfortunately, a large portion of the European population has a low level of health literacy. A recent study involving 17 European countries showed that almost half of the European population (46%) has inadequate and problematic health literacy (Figure 7).[13] The study also identified the most difficult tasks reported by individuals: evaluating different treatment options, protecting themselves from illness using information from mass media, and finding information on how to handle mental health problems.

While in recent years the availability of health-related information available through media channels has increased, different surveys reveal that identifying reliable and objective sources has become a tremendous challenge. Young people reach healthcare information through sites such as YouTube, Instagram and online forums just as often as through official information and information websites.[14]
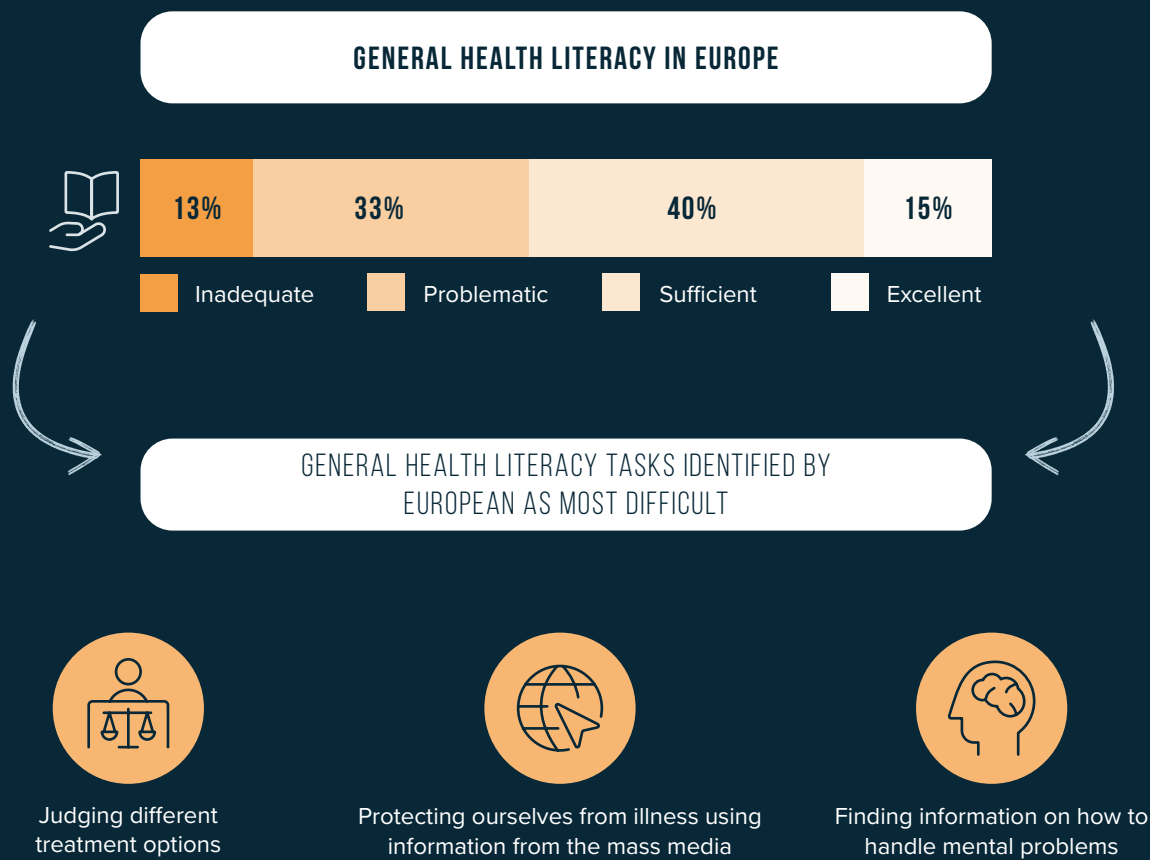
> **"The lack of health literacy is an invisible epidemic and a neglected public health challenge. COVID has made this problem more apparent"**
>
> Kristine Sørensen – Founding Director, Global Health Literacy Academy

> **"Providing information is a passive effort, but how can we ensure that it is accessed and understood by those that we're targeting it for?"**
>
> Lars Münter – Head of International Projects Unit, Danish Committee for Health Education

Figure 7

General health literacy in Europe as estimated by a survey conducted in 17 countries

GENERAL HEALTH LITERACY IN EUROPE

13%	33%	40%	15%

■ Inadequate   ■ Problematic   ■ Sufficient   ■ Excellent

GENERAL HEALTH LITERACY TASKS IDENTIFIED BY EUROPEAN AS MOST DIFFICULT

Judging different treatment options

Protecting ourselves from illness using information from the mass media

Finding information on how to handle mental problems

RECOMMENDATION 1

INCLUDE HEALTH LITERACY AND SELF-CARE EDUCATION IN THE SCHOOL CURRICULA TO START BUILDING HEALTH LITERACY SKILLS EARLY ON:

It is easier to create long-lasting behaviors and promote a healthy lifestyle when we start early. School curricula should include medication literacy, prevention-related literacy, disease management-related literacy, and self-care. Health literacy is already included in the curricula of a number of European countries, such as Germany[15] and Finland[11]. In the same way we learn geography or history, individuals should also begin learning about the management of their own health during their formative years. This should include teaching on skills to search for, access, and critically analyse information from various sources.

RECOMMENDATION 2

SIMPLIFY OTC LEAFLETS TO MAKE INFORMATION MORE ACCESSIBLE TO ALL:

Medication leaflets include a huge amount of information and can be hard to understand. Simplifying the way information is provided could help individuals be better informed about the OTC products they use by giving them simple, relevant information about dosages, indications and contraindications. The introduction of a machine-readable digital formats that would allow optimised viewing on devices such as smartphones / laptops / tablets with user-friendly videos, collapsible label sections, or other machine-readable, electronically enabled facilitators could offer new opportunities to improve the quality and quantity of information provision to individuals about the OTC products they use. A 2020 publication by the EMA (European Medicines Agency), HMA (Heads of Medicines Agencies) and the EC (European Commission) highlighted the key principles and benefits of electronic product information including electronic leaflets:

- providing up-to-date information to patients and consumers
- improving accessibility for those with sight impairments or literacy limitations (e.g. via audio formats)
- providing information in all official EU languages (plus Norwegian and Icelandic).[16]

CREATE A "FACT CHECKING" PROJECT AT EU LEVEL:

With the growing use of mainstream and social media, there is a heightened risk of people being misled by biased and false information, as demonstrated by the recent Covid-19 pandemic17[17]. It is therefore key to understand the extent, type and impact of misinformation in self-care at a European level via a fact-checking project.

A way to lead people to correct information sources would be to award a certification for reliable sites, together with a project or committee focusing on "fact checking" to combat misinformation. This initiative would complement the European Commission's existing efforts in this area, such as the Code of Practice on Disinformation (which contains a number of self-regulatory standards for the industry), the European Digital Media Observatory, the action plan on disinformation, and the COVID-19 monitoring and reporting program.

> **"We teach children how to recycle at school. Why not also teach them how to manage their health and use medicines responsibly?"**
>
> Jurate Scarvaitė – Director General (AESGP)

> **"Leaflets tend to be long and complicated. Elderly people tend to have a hard time finding the information they need and are discouraged from attempting to read them. We need to think innovatively here"**
>
> Estefania Guzman Cordero – Project Communications Officer, European Patients' Forum

2.2.

MOTIVATION: GATHERING THE RIGHT EVIDENCE AND CREATING WILLINGNESS FOR SELF-CARE BEHAVIORS AND PRODUCTS

VISION

PROVIDING THE RIGHT DISPOSITION FOR SELF-CARE IN INDIVIDUALS

The volume of available healthcare-related data and information has skyrocketed in the last decade: from affordable genome sequencing to individuals, to consumer-grade applications and wearables able to track clinical parameters and give lifestyle advice. This is coupled with an increased social interest in healthy life choices, and an increasing number of accessible, healthcare-related publications in generalist media. The right use of this information and data through digital solutions can be an important enabler for the engagement of individuals in the management of their own health. However, to achieve this, emerging solutions must meet two key requirements: they must show that they work, and they must create the right encouragement for individuals to use them.

Gathering the right evidence to support emerging self-care interventions is crucial. With the use of apps in smartphones, it is possible to objectively, reliably, and accurately measure physiological parameters and healthcare data, including data related to movement, sleep, height and weight. A number of currently available apps allow users to track other biomarkers, symptoms, medication use, and lifestyle-related data. This facilitates the collection of Real-World Data (RWD) and generation of Real-World Evidence (RWE) on the effectiveness and associated related quality of life outcomes. There are already instances of RWE aiding decision-making for OTC products in self-care, particularly in weight management and smoking cessation[18]. This list is likely to expand further.

> "Society has become very receptive to evidence. Society now understands that if we make decisions on evidence, and if evidence moves, it changes the decision"
>
> Darragh O'Loughlin — Secretary General, Irish Pharmacy Union

However, apart from generating evidence, self-care products must also entice the individual to use them sustainably. For this, a few characteristics are key: emerging digital and non-digital interventions must be easy to use, designed with the user in mind, and either hold or link to the right sources of information or derived health advice. For these solutions to achieve full impact, we must also create the right structures and technology to allow individuals (patients and HCPs alike) to use these digital solutions in their everyday workflows without extra burdens, and to share information and data with each other and with third parties in a secure and integrated manner.

> "In the context of chronic pain management, patient experiences can be very diverse depending on the type of pain, and the management approaches required can be quite complex. Better guidance may be required for general practitioners and pharmacists on when pain conditions are suitable for self-management and what approaches are possible"
>
> Sam Kynman — Executive director, European Pain Federation (EFIC)

BARRIERS

GATHERING EVIDENCE & GENERATING WILLINGNESS

Individuals will increase their commitment to a certain product, intervention, or practice when there is evidence that their choices provide a proven benefit, and when its use proves not to be burdensome. However, even with the advent of digital tools, it is not easy to gather robust evidence for self-care interventions, or to create tools that everybody will be willing to invest time and effort on.

Interoperability issues between datasets gathered by the diverse prevention, lifestyle and other self-care applications make it hard for the industry to be able to provide evidence of improved outcomes. It is important to strike the right balance between considerations about data sharing, anonymization and ethics and the integration of individual choices and behavioral changes into centralized healthcare outcomes, outside individual studies, or trials.

It is also important to include stakeholders in the development of innovative self-care practices or solutions. Involving individuals, patients, doctors, pharmacists, hospitals, and nurses early in the design process helps to ensure that solutions can easily integrate into the daily routines of all involved, and that the right incentives are taken into account.

RECOMMENDATION 4

SUPPORT RWE GENERATION AND ACCEPTANCE FOR SELF-CARE PRODUCTS AND INTERVENTIONS, AND COUPLE IT TO INCREASED WILLINGNESS:

Consumers are willing to engage in self-care, but the practices they are asked to engage in must work. Individuals often increase their commitment to a certain product, intervention, or practice when there is evidence to support their choices and when they are rewarded in one way or another. Currently, however, it is not easy to gather RWE for self-care interventions. People's behavior – particularly about things like diet and exercise – is often complex, which makes it hard to show the benefit of any individual intervention. This in turn makes it hard to create the right narrative or incentive for people to adapt their behavior towards healthier choices. For example, with regards to nutrition and dieting, individuals often take several products and supplements at the same time (e.g., through food choices and supplemented food), which introduces confounding factors. There are therefore two key considerations: making use of large pools of data and collecting RWE, and ensuring the evidence is narrated in a way that shows or incentivizes the right behaviors. RWE creates new opportunities to evaluate the effectiveness and safety of a self-care product or intervention when it is used in real life by a large and diverse population.[18]

> ## "We need to work together to unlock the potential of data in Europe"
>
> Irina Kalderon Libal – Policy Officer, DG Connect, EU Commission

2.3.

OPPORTUNITY: ENABLING EVERYBODY TO ACCESS SELF-CARE

VISION

CREATING THE RIGHT STRUCTURES FOR ACCESS

Sustainable health systems must balance the provision of safe and effective solutions, support innovation and ensure access and affordability for all individuals. Individuals should be able to access the self-care products they need without financial worries. On the other hand, it is important to ensure that supporting self-care does not create an unnecessary financial burden on the health system. There can be clear returns on investment for supporting self-care practices.

In Germany, increased access to OTC products for treating minor ailments resulted in decreases to the amount of prescribed medication, which also means better overall health and savings for the healthcare system.[19] Hence, the vision in this aspect is more of an open question: how can we, as a society, think innovatively to ensure self-care is accessible and maximise return on investment in ways that do not create issues for the healthcare system?

> "Although the costs of the OTC medicines are transferred to the consumer, the consumer gains in terms of greater accessibility to the medicines, without the need for a medical consultation beforehand. Accordingly, there are significant time savings to both the consumer and the health professional."

Communication from the Commission to the Council, the European Parliament, the Economic and Social Committee and the Committee of the Regions. A Stronger European-based Pharmaceutical Industry for the Benefit of the Patient – A Call for Action, 1 July 2003

BARRIERS

NON-PRESCRIPTION IS AN OUT-OF-POCKET EXPENSE AND CAN BE PERCEIVED AS A BARRIER TO ACCESS

While some studies have shown that increasing the availability of non-prescription products (e.g. by switching certain medicines or products from prescription to OTC status)[20] can empower individuals and create healthcare system savings, countries, including Germany, will not vary their overall approach to the OTC medicines market in the foreseeable future. This complexity highlights the importance of carefully considering the socio-economic aspects and externalities on the health system when making decisions to promote more equal access to non-prescription products.

It is key to find out where the OTC market requires specific intervention to allow greater access to products and where such intervention delivers an overall systemic return on investment. In the EU specifically, as this is a national competency of EU member states, it is hard to find a definitive EU-level view. Member States are confronted with the common challenge of balancing three overarching objectives:

- optimal use of resources to ensure sustainable financing of healthcare for an ageing EU population,
- access to medicines for EU patients, and
- reward for valuable innovation.

More efficient market mechanisms and, in particular, price competition for OTCs, could provide more patient choice at a more affordable cost in this sector.

If a switch removes a medicine from a national reimbursement list, it may negatively impact some individuals who have a limited ability to pay, despite the many other advantages gained through OTC status. In some cases, it may be appropriate to consider innovative financial support schemes that consider system returns on investment while ensuring access and affordability for all individuals, to help ensure sustainability for the healthcare system.

> **"There is large heterogeneity in Europe in regards to access to self-care. Attitudes and regulations are very different in different countries, so it is difficult sometimes to extrapolate initiatives and policies to other countries."**
>
> Gisele Pickering – Chair of the Research Committee, European Pain Federation (EFIC)

RECOMMENDATION 5

CREATE INNOVATIVE FINANCIAL SCHEMES TO MAKE NON-PRESCRIPTION PRODUCTS ACCESSIBLE TO ALL:

We recommend that policymakers identify innovative financing solutions to ensure non-prescription products are widely available:

- For example in the Netherlands, 5 groups of OTC products (calcium tablets, antihistamines, laxatives, anti-diarrhoea and anti-emetics) are reimbursed when they are needed for chronic conditions lasting 6 months or longer.[21]

- In countries such as Belgium, health insurance offers a personal fixed budget per year for homeopathic and alternative medicine. A similar scheme could be considered for non-prescription medicines.

- Other ideas could include to finance/reimburse OTC products to individuals on pensions or state benefits to ensure the healthcare system remains sustainable while enabling all citizens to access the self-care products and practices they need.

Figure 8

The right skills to access relevant information, the right tools to access and interpret health information objectively, and the right knowledge to understand the basics of healthy choices will enable individuals to take care of their own health effectively.

EMPOWERING INDIVIDUALS TO MAKE DECISIONS ABOUT THEIR HEALTH

ACCESS
relevant information

INTERPRET
health information objectively

KNOWLEDGE
to make healthy choices
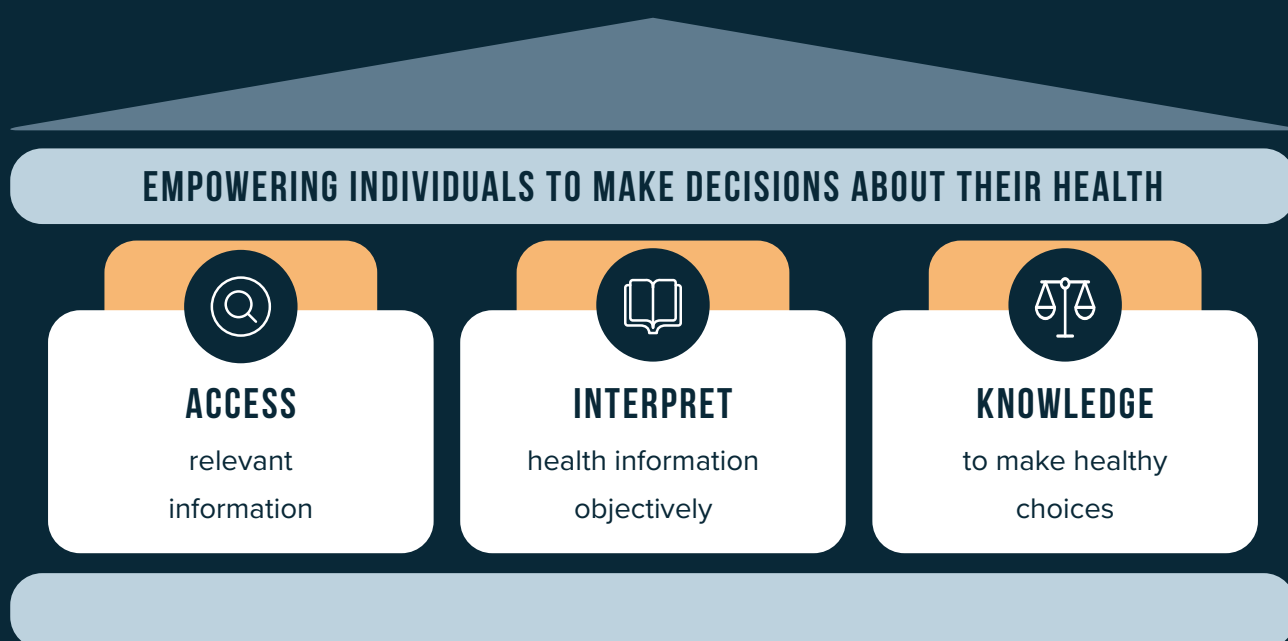
CHAPTER 3

FULLY INTEGRATING SELF-CARE AS PART OF THE HEALTHCARE SYSTEM

"It is important is to consider and define the role of self-care, and to have clear frameworks for integration with formal care. On the one hand, self-care should not be an excuse for the healthcare system to stop doing their part. But it should not be an excuse for cost-ineffective processes"

Tiago Oliveira Hashiguchi – Policy Analyst, Organisation for Economic Cooperation and Development (OECD)

As well as empowering individuals, the readiness of healthcare systems to support and enable self-care is key to creating a facilitating environment. Self-care can only show its full potential if it is well-integrated in the healthcare journey of an individual. Good integration means individuals can be supported by HCPs (such as pharmacists) for self-care advice, that there is good data exchange and communication around self-care, that HCPs are connected to each other, and that they are well-supported to guide individuals on their engagement with self-care (Fig. 9).

3.1.

GUIDANCE AND ROLES

VISION

A HOLISTIC AND PREVENTIVE APPROACH TO CARE

Healthcare systems in Europe must expand their focus from treatments and cures to prevention and health promotion. Self-care is an important enabler of a preventive approach to care, which empowers individuals to take ownership of their health and be at the center of their care journey.

Current care systems are narrowly focused on treating specific health problems. We need to shift to a health promotion approach, which considers overall physical & mental well-being and regards quality of life as the ultimate goal.

Figure 9

Integrating self-care in the health continuum

SELF-CARE

STAYING HEALTH   GETTING BETTER   LIVING WITH A DESEASE

PHARMACISTS CAN PLAY AN IMPORTANT ADVISORY ROLE IN SELF-CARE

Pharmacies are the most widely distributed healthcare facility in Europe. 58% of European citizens have a community pharmacy they can reach within a five-minute walking distance radius,[22] where professional health advice is often readily available. In most European countries, pharmacies offer basic health checks (blood pressure, glucose, etc.), coordinate disease management programmes (diabetes, hypertension, etc.), and provide advice on lifestyle choices (e.g. smoking cessation). Pharmacists also play a significant role in providing advice and guidance on the responsible use of self-care products. This unique combination of location, accessibility, and expertise means pharmacies can evolve into local self-care hubs throughout European communities.

However, it is also key to acknowledge that the traditional pharmacy model is being disrupted, as telehealth and e-commerce are providing challenges to the future role of community pharmacists. It is therefore important to deal with both the positive and negative impacts of the emerging healthcare models on the role of community pharmacists.

> **"We want to see a holistic approach to care where better health is not the end goal, but is the means to a better overall quality of life"**
>
> Kristine Sørensen – Founding Director, Global Health Literacy Academy

> **"It is important to have the right conditions and incentives to put pharmacists in advisory roles. The incentives and remuneration system now is such that it focuses on dispensing and not advising"**
>
> Barbara Daled-Rosseel – Manager (health and food sector), Euroconsumers
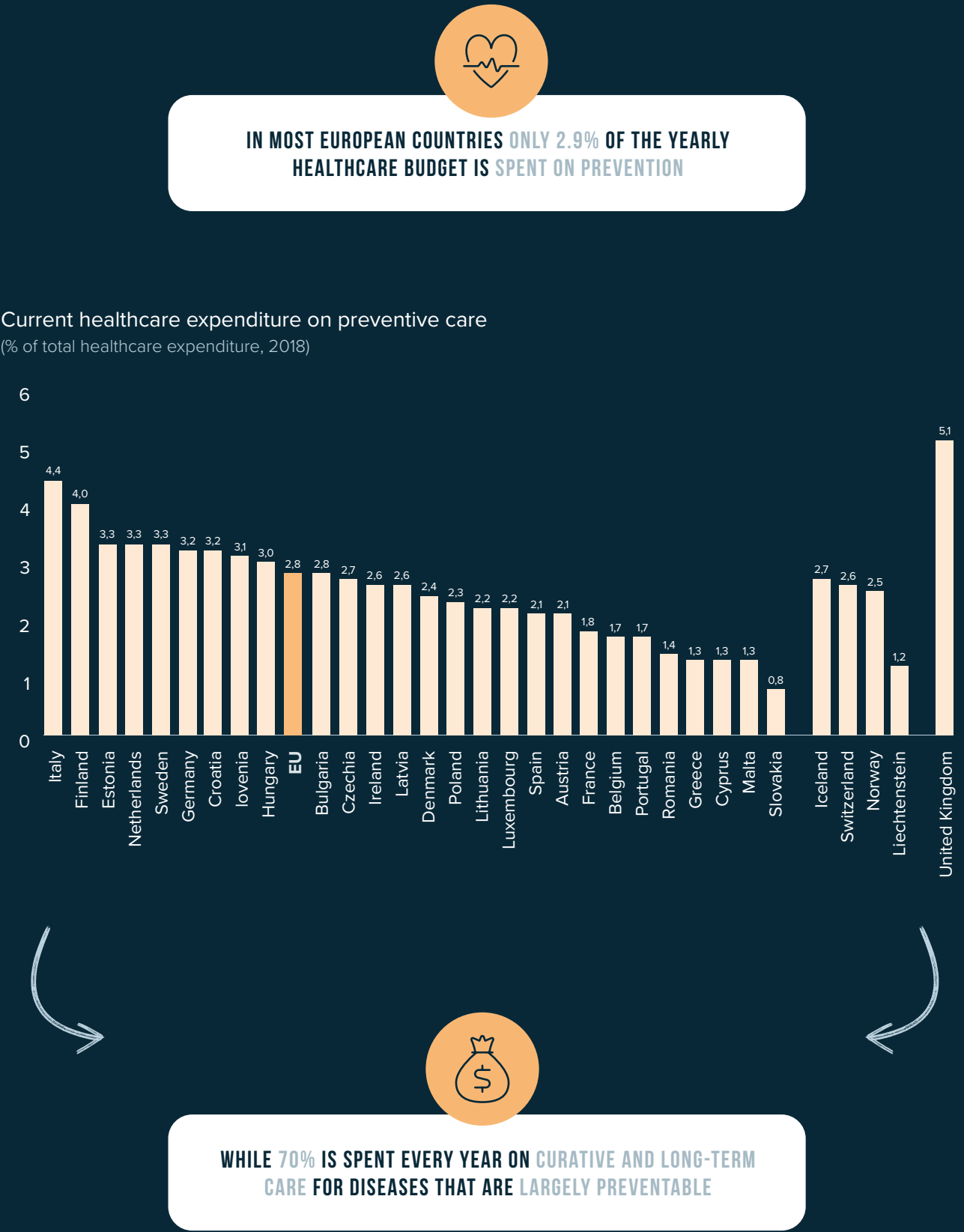
LIMITED INVESTMENT IN PREVENTION

A holistic and preventive approach to care in Europe requires further investment in prevention. European countries currently only spend a small fraction of their healthcare budgets on prevention (Figure 10). Treating a disease is often more expensive than preventing it; the WHO estimates that at least 80% of all heart diseases, strokes, and diabetes, — and 40% of cancers — could be avoided by using appropriate preventive measures.[23] However, 2019 data from the European Commission shows that on average, EU countries only spend 2.9% of their healthcare budgets on prevention, while approximately 70% is spent on curative and long-term care for diseases that are largely preventable.[24]

> **"Currently self- care is still very problem-focused. It should be more holistic and with a larger focus on prevention"**
>
> Lieven Annemans — Professor in Health Economics, University of Ghent

Figure 10

European spending on prevention vs. curative and long-term care 2019[30]

IN MOST EUROPEAN COUNTRIES ONLY 2.9% **OF THE YEARLY HEALTHCARE BUDGET IS** SPENT ON PREVENTION

Current healthcare expenditure on preventive care
(% of total healthcare expenditure, 2018)

WHILE 70% **IS SPENT EVERY YEAR ON** CURATIVE AND LONG-TERM CARE **FOR DISEASES THAT ARE** LARGELY PREVENTABLE

CREATE ENABLING FINANCIAL STRUCTURES TO SUPPORT PHARMACISTS IN THEIR ADVISORY ROLE:

Pharmacists have historically and traditionally provided self-care advice to individuals. However, as pharmacists are increasingly incentivised to become more efficient dispensing businesses, there is less scope to provide additional services. We need to create the right conditions and incentives to enable pharmacists to play more advisory roles. Current incentives and remuneration systems focus on dispensing rather than advising. In Scotland, the minor ailments service was implemented with the idea of increasing the involvement of the pharmacist in providing advice about minor ailments. In the program, eligible individuals register at the community pharmacy for free advice and medicines for minor ailments. Pharmacists get reimbursement for the service. The scheme helps position community pharmacies as a central player in self-care and frees up time for GPs to focus on patients who really need their expertise.[25]

"A mixed remuneration scheme is desired, where pharmacists receive reimbursement from dispensing and additional compensation for other interventions to ensure the pharmacist is not disincentivized from providing these services"

Ema Paulino – President, Portuguese National Pharmacy Association

3.2.

INFORMATION EXCHANGE AND JOINT DECISION-MAKING

VISION

INTEGRATED, INDIVIDUAL-CENTERED CARE

The continuous rise of chronic diseases and co-morbidities has highlighted the need for a more integrated approach to care, with joint networks of HCPs and patients at the center of care delivery. We want to see engaged individuals playing an active role in their health management together with HCPs who understand the importance of shared decision making.

A truly integrated approach to healthcare involves recognizing self-care as an integral component of health provision, especially for individuals living with chronic diseases.

CONVENTATIONAL HEALTHCARE

SELF-CARE

INTEGRATED HEALTH
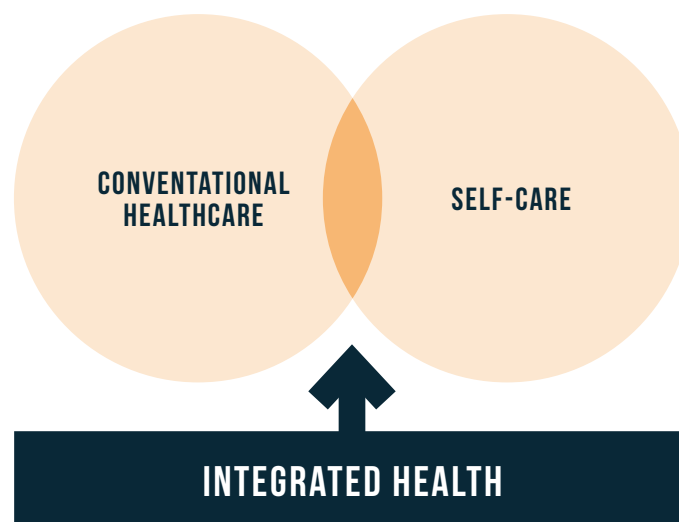
"**Individuals want to engage in self-care, but there is too much misinformation. Both on lifestyle and the use of medicines. We need more evidence and objective information**"

Barbara Daled-Rosseel – Manager (health and food sector), Euroconsumers

BARRIERS

SELF-CARE IS OFTEN NOT WELL-INTEGRATED INTO THE HEALTHCARE JOURNEY OF AN INDIVIDUAL

There is a traditional disconnect between different parts of the healthcare continuum. Advice from community pharmacists, oral healthcare, physiotherapy, mental therapy, etc., are key aspects of care that are not fully connected with general healthcare practice. Furthermore, on average, individuals spend less than one hour with a healthcare professional every year, but many more hours practicing other forms self-care.[26]

The way we engage in self-care has an important effect on our health outcomes. More awareness and guidance from HCPs is necessary to support individuals in their self-care journeys, not only through HCP-individual interactions, but also via education and public health messaging and campaigns. Many HCPs are unaware of self-care interventions and products used by individuals, and therefore at times are unable to provide guidance in this area. There must be a positive environment that enables better communication around self-care practices that goes both ways: HCP to patient, on guidance for recommended self-care practices; and patient to HCP, on their habitual self-care practices and lifestyle choices.

> **"It's very important to know what we're striving for in order to improve lifestyle habits, as the goals could be very different for people. This individualized context needs to be known"**
>
> Sofia Svanteson – Co-Founder & CEO, Elsa Science

> **"It's important to consider healthcare and self-care as a whole and not to have a split, where self-care becomes the realm of the individual and more traditional care is only in the hands of HCPs. Consumers often don't couple both"**
>
> Barbara Daled-Rosseel – Manager (health and food sector), Euroconsumers

RECOMMENDATION 7

INCLUDE SELF-CARE IN THE CURRICULUM OF HCPS OR CREATE A EUROPE-WIDE SELF-CARE TRAINING PROGRAM FOR HCPS:

Individuals want to feel supported by HCPs in their self-care journeys. Self-care is not a synonym for solo care. However, the inclusion of self-care in HCP education varies widely in Europe. To facilitate their involvement and support for HCPs, guidance and education should be provided for doctors, pharmacists, community nurses and other healthcare professionals about how they can support the self-care journeys of patients and individuals. A good example of an initiative targeted at educating and generating awareness among HCPs is the Greater Manchester self-care training in the UK, where over 200 healthcare professionals have completed self-care training in North Manchester since 2013. Of the participating HCPs, 93% reported they had more confidence in enabling self-care because of the training.[27]

RECOMMENDATION 8

CREATE STRUCTURES AND TOOLS THAT SUPPORT DATA EXCHANGE AND COMMUNICATION AROUND SELF-CARE:

A seamless communication between individuals and HCPs is key for the integration of self-care in the healthcare journey of an individual. To make this happen, we need to not only create awareness, but also have the right tools to encourage dialogue around self-care between individuals and HCPs. Doctors are rarely aware of self-care practices carried out by individuals, including OTC product use. Individual self-care practices could be a part of the information available in patient data records. Our recommendation for a first step to address this issue is to foster the creation of digital tools or questionnaires to help individuals record self-care practices and share that information with HCPs, and to encourage HCPs to ask patients to share their practices.

RECOMMENDATION 9

CREATE PLATFORMS FOR COLLABORATION BETWEEN DIFFERENT TYPES OF HCPS:

A 2020 study shows that GPs would be open to deeper collaborations with pharmacists if this helps GPs reduce their workload.[28] In many countries, there is little communication and exchange of information between HCPs (dentists, physiotherapists, nurses, community health workers, mental health therapists, pharmacists...). To counteract this, it is vital to facilitate data exchange and communication among healthcare professionals. For example, 'NetCare', a Swiss program connecting pharmacists and GPs enables individuals with certain symptoms to undergo an initial triage in their local community pharmacies with trained pharmacists. Results showed that 73% of cases were able to be dealt with by pharmacists, while only 27% needed involvement of a physician/GP.[29]

3.3.

POLICIES AND GUIDELINES

VISION

A SET OF POLICIES AT EUROPEAN AND NATIONAL LEVEL THAT ADDRESS THE CHALLENGES OUTLINED IN THIS PAPER

This paper has explored a number of challenges for individuals and for the healthcare system regarding self-care and has made some recommendations to overcome these challenges. However, it is key to ensure that this vision is fully taken up by policymakers. Self-care will only be able to positively impact the population if the right strategies are developed, and the best sets of initiatives (economic, regulatory, etc.) are implemented.

For this, clear narratives around the importance of well-being are important to guide and support individuals and healthcare professionals to ensure self-care is well integrated into the healthcare journey of an individual, and that it is recognized as an important part of healthcare.

> "The development of effective policies will require full engagement from all stakeholders; including patient organisations, HCPs and citizen"
>
> Lieven Annemans – Professor in Health Economics, University of Ghent

LACK OF EUROPEAN AND NATIONAL POLICIES AND GUIDELINES TO SUPPORT SELF-CARE

The practice of responsible self-care can bring significant benefits both for individuals and healthcare systems in Europe. Yet, self-care is often not discussed or included explicitly either in EU or national health policies. A recent report from AESGP revealed that only a few EU Member States have clear national policies on self-care.[7]

Examples of guidelines, white papers and legislation on self-care can be found in Ireland, Finland, Switzerland, and also the UK. However, many countries do not yet feature self-care in their sets of policymaking priorities. As an overarching example, at a European level, with the recent public consultation on the Pharmaceutical Strategy for Europe, the topic of self-care is not featured and opportunities for it to link with the wider prescription care continuum have been missed. Self-care has the potential to support certain problems that the new Pharmaceutical Strategy for Europe wants to tackle and work in partnership with prescription medicines to achieve that.

> **"In order to ensure priorities are answered, investment is needed to ensure these points are heard. Investors on self-care should act as business angels where the priority is impact, not return — a more business angel-like approach. Policymakers should also embrace this way of thinking"**
>
> Prof. Susana Frazão Pinheiro,
> Head of Healthcare and Life Sciences,
> UCL School of Management

CREATING SUPPORTING POLICIES FOR SELF-CARE AT THE EUROPEAN AND NATIONAL LEVEL:

Self-care is a topic which is not actively or systematically included in European policies. The Pharmaceutical Strategy for Europe first published by the European Commission for consultation in 2020 highlights the importance of sustainability and resilience for European healthcare systems. There is an important role for self-care and health literacy in the overarching aim to achieve these goals. If we want to advance towards person-centered, holistic and preventive care, self-care must be part of the policy agenda, and at the same time something that policymakers recognize as important. At the national level, only a few European countries have clear national policies on self-care, including Finland, Switzerland, UK and Ireland.[7] These countries have developed comprehensive policies to build sustainable and responsible self-care, showing that self-care policies can further empower individuals and provide guidance and support to HCPs. The development of self-care policies should be followed by the identification of indicators which can help us understand where we stand and track our progress towards that goal, which could include RWE data on self-care.

CHAPTER 4

CONCLUSIONS

Over the last two years, the COVID-19 pandemic has accentuated the need for resilient healthcare systems and populations, and highlighted the value of self-care towards achieving sustainable resilience in the future. Individuals who follow a healthy lifestyle and focus on staying healthy have a lower overall risk of disease. The self-management of minor ailments plays a key role in freeing-up healthcare and hospital resources for those with urgent needs. However, there remain challenges such as poor health literacy and the low investment in prevention, limiting the positive ways in which self-care can impact healthcare in Europe.

We see two key directions to improve the role of self-care in Europe:

- The first is to empower individuals with the right skills, motivation and opportunities to engage in self-care. This requires a larger focus on health literacy and the availability of objective sources of health-related information. It also refers to making self-care accessible and affordable for all.

  - Include health literacy and self-care education in the school curricula to start building health literacy skills early on
  - Simplify OTC leaflets to make information more accessible to all
  - Create a "fact checking" project at EU level
  - Support (real-world) evidence generation and acceptance for self-care products and interventions
  - Create innovative financial schemes to make self-care accessible to all

- The second key aspect is the readiness of the healthcare system to support and enable self-care. For self-care to show its full potential, empowered individuals must find a facilitating environment. For this, we need to further foster the role of the pharmacist as a self-care advisor, improve the communication and data transfer between individuals and HCPs as well as between HCPs, and create supporting policies, both at European and national level.

  - Create enabling financial structures to support pharmacists in their advisory role
  - Include self-care in the curriculum of HCPs or create a Europe-wide self-care training program for HCPs
  - Create structures and tools that support data exchange and communication around self-care
  - Create platforms for collaboration between different types of HCPs
  - Create supporting policies for self-care at the European and national level

> **We are currently in a unique moment where individuals are highly motivated to engage in self-care. We can seize this opportunity, but to do so effectively, we must provide the necessary toolbox and support system to maintain the momentum.**

CHAPTER 5

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